

EXHIBIT E

ROCHESTER POLICE DEPARTMENT INCIDENT REPORT		CR # 2015-00235240						
Page 1 of 6								
DETAIL	Incident Type 22. All Other Offenses		Report Date 09/04/2015	Report Time 23:28	Date From 09/04/2015	Time From 23:28	Date To 09/04/2015	Time To 23:28
	Incident Address 439 South AVE		Beat 229	Campus Code				
	Violent Crime Context							
	Status - PL 140.10 0A BM3 Attempt/Commit - Completed Counts - 1 Description - Criminal Trespass 3rd: Property Fenced in or Enclosed							
OFFENSES	Location Street-47		Weapon					
	Larceny Type		Aggravated Assault Circumstances		Gang Related No		Computer No	
	Bias Type No Bias-Not Applicable-77		Entry Point		Method of Entry		# of Premises Entered	
	Status - PL 205.30 AMO Attempt/Commit - Completed Counts - 1 Description - Resisting Arrest							
	Location Street-47		Weapon					
	Larceny Type		Aggravated Assault Circumstances		Gang Related No		Computer No	
	Bias Type No Bias-Not Applicable-77		Entry Point		Method of Entry		# of Premises Entered	
	VICTIM	Victim Type Individual-I		Victim Name (Last, First, Middle) Algazali, Dawan				
Address 439 South AVE		Date of Birth	Age	Sex M	Race A	Ethnicity N	Residence Status Resident	
City, State, Zip Rochester, NY		Relationship and Relationship (Offender Name, DOB, Relationship)						
Telephone		Level of Injury Physical Injury		Type of Injury Apparent Minor Injury		Medical Treatment Not Treated		
PERSONS	R - Reporting Person W - Witness PK - Person w/Knowledge NI - Not Interviewed							
	Type	Name (Last, First, Middle)		Sex	Race	Eth	Address	Telephone No.
	W	maracle, duane		M	W	N	439 S South AVE Rochester, NY	
	W	zayed, rafaa		M	W	N	439 South AVE Rochester, NY	
SUSPECT / MISSING PER	Type - S Arrestee		Suspect Name (Last, First, Middle) Vann, David, C				Nickname	
	Address 500 South AVE ROCHESTER, NY 14621		Date of Birth 12/18/1991	Age 23	Sex M	Race B	Ethnicity N	MoRIS / JCR # 325538
	Height 5' 9	Weight 160	Hair Color Black	Hair Length Bald	Eye Color Brown	Glasses	Complexion Thin	Build Thin
	Facial Hair		Gang Affiliation					
	Clothing, Jewelry Distinguishing Features				Offender Condition Apparently Normal		Scars, Marks, Tattoos	
	Mother's Maiden Name		Place of Birth		School Name / ID #			
	INVESTIGATION	Modus Operandi						
01. Witness to the offense?		05. Can a suspect be described?		09. Is there significant Modus Operandi present?				
02. Surveillance footage of event?		06. Can a suspect be identified?		10. Is there significant physical evidence present?				
03. Can a suspect be named?		07. Can a suspect vehicle be identified?		11. Has evidence tech work been performed?				
04. Can a suspect be located?		08. Is stolen property traceable?		12. Preliminary investigation NOT completed?				
Case Status Cleared by Arrest - Adult		Exceptional Clearance		Assigned Bureau Patrol - Central		Review Box Central 4th		
Reporting Officer MITCHELL		IBA # 2134	Date 09/15/2015	Reviewed By COR00295 ZIMMERMAN, DANIEL J 18/16/2015 09:55				

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ADD'L OFFENSE	Statute - PL 120.00 02 AM3 Attempt/Conmit - Completed Counts - 1				
	Description - Assault 3rd: Recklessly Cause Physical Injury				
	Location Street-47		Weapon Not Reported-88		
	Larceny Type		Aggravated Assault Circumstances Assault on LE Officer		Gang Related Yes
VICTIM #2	Victim Type Police Officer-L		Victim Name (Last, First, Middle) Kester, Jeffery		
	Address 185 EXCHANGE BLVD		Date of Birth	Age	Sex
	City, State, Zip ROCHESTER, NY 14614		Race N		Ethnicity Resident
	Telephone (585)428-1110		Level of Injury Serious Physical Injury		Type of Injury Apparent Broken Bones
PERSONS	Medical Treatment Treated and Released				
	R - Reporting Person W - Witness PK - Person w/ knowledge Not Interviewed				
	Type	Name (Last, First, Middle)	DOB	Sex	Race
	Address		Telephone No.		
SUSPECT #2	Type -				
	Suspect Name (Last, First, Middle)				
	Address				
	Date of Birth				
PROPERTY	Height	Weight	Hair Color	Hair Length	Eye Color
	Glasses	Complexion	Build	Facial Hair	Gang Affiliation
	Clothing, Jewelry, Distinguishing Features			Offender Condition	
	Scars, Marks, Tattoos				
PROPERTY	Property Code		Property Type		Property Value
	Item Type and Description		Serial Number		Color
	Quantity	Unit of Measure	Measurement Source	Drug Type	
	Property Code		Property Type		Property Value
FIREARM	Item Type and Description		Serial Number		Color
	Quantity	Unit of Measure	Measurement Source	Drug Type	
	Firearm Property Code		Firearm Value	Make	Model
	Caliber	Capacity	Type	Action	Serial Number
VEHICLE	Description		Recovery Date		
	Vehicle Status		Year	Make	Model
	State	Plate Number	VIN #	Style	Color
	Additional Description		Recovery Date		
Reporting Officer MITCHELL STEVEN					
IBM #		Date	Reviewed By		
2134		09/16/2015	COR1dz295 ZIMMERMAN, DANIEL J. 9/16/2015 00:55		

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ROCHESTER POLICE DEPARTMENT INCIDENT REPORT

CR #
2015-00235240

At the above date and time, I responded to the A and Z market at 439 South Ave. for the report of a male refusing to leave. I responded with (V2) Ofc. Drake and (V3) Ofc. Kester. Upon arrival, I spoke with (V1) (Algazali), an employee of the store, who stated that (A) (Vann) entered the store and wanted to buy beer. (V1) states that he asked (A) for identification to buy the beer and (A) did not have identification. (V1) refused to sell (A) a beer and (V) remained in the location. (V1) stated that (A) was told to leave the location several times, but remained in the store for approximately 45 minutes. (V1) states that (A) became aggressive towards (V1) and (V1) pushed (A) out the back door of the location and locked that door. During this altercation, (V1) suffered an injury to the little finger on (V1)'s left hand, which was later found to be a fracture in that finger. (A) then came back to the front of the location and entered the store again. At this point, (V1) called the 911.

After speaking with (V1) and the officers on scene, I went inside the front door area of the location to speak with (A). I told (A) that he needed to leave the location, just as he had been told by (V1) several times. (A) told me that he did not have to leave the store and argued with me. (A) then did walked out the front of the store to the side walk, almost bumping into Ofc. Kester. (A) did stop at the side walk, and turning towards officers and (V1). (A) began to argue with (V1) again and then moved into arrest (A) for trespass. As I began to handcuff (A), (A) refused to keep his right arm behind his back and pulled it away from officers. This action forced officers to bring (A) to the ground for stabilization, where (A) was handcuffed. While going to the ground, (A) fell on top of (V2) (Kester). (V2) immediately yelled out that he hurt his leg. I moved (A) off of (V2) and pulled (A) away from (V2). I asked if (V2) was alright and he told me he was not. I then assisted (A) to his feet and walked him over to my patrol vehicle to do a proper search.

As (A) was brought to my patrol vehicle, he immediately pulled away from me. (V3) (Drake) ran over to assist me in controlling (A). (A) was told multiple times to get on the ground and would not comply. (A) was thrashing and pulling his body away from officers. The actions of (A) once again forced (V3) and I to bring (A) to the ground. Once on the ground, (V3) immediately stated that he was hurt and I could see that (V3) was not able to move his right shoulder. I continued attempting to control of (A) while on the ground. (A) continued to roll around on the ground and reached with his hands in the area of his waistband. Based on my training and experience, I know the area of a waist band to be a common place for individuals to conceal weapons and I did fear that (A) had a weapon on his person.

Several other officers arrived at the scene and I was able to have (A) properly searched and placed in the rear of my patrol vehicle. (A) refused to give me any of his personal information, however (V1) stated that (A) lived at 500 South Ave. Ofc. Barber was able to speak with the management of 500 South Ave. and it was confirmed that (A) did live at that location. Management did provide Ofc. Barber with copies of (A)'s NYS Licence, Social Security Card and Birth Certificate, confirming the identity of (A).

(V2) was taken by Rural Metro to Highland Hospital for evaluation. (V2) stated that his pain level was an 8 out of 10. It was determined at the hospital that (V2) had a broken right fibula. (V2) was treated for the injury and released.

(V3) was taken by Rural Metro to Rochester General Hospital for evaluation. (V3) stated that he had a pain level of an 8 out of 10. It was determined at the hospital that (V3) had a separated right shoulder. (V3) was treated for the injury and released.


Technician Farbizio (270) did respond to the location. (A) was treated for exposure to O.C. Spray by

Reporting Officer	IBM #	Date	Reviewed By
MITCHELL	STEVEN	2134	09/15/2015
CORIdz295 ZIMMERMAN, DANIEL J. 9/16/2015 00:55			

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<p>Rural Metro at the incident of the location. Ofc. Kephart and I transported (A) to booking without further incident.</p> <p style="text-align: center; font-size: 48pt; transform: rotate(-30deg); opacity: 0.5;">18-CV-6464</p>			
NARRATIVE			
Reporting Officer MITCHELL STEVEN	IBM # 2134	Date 09/15/2015	Reviewed By COR\dz296 ZIMMERMAN, DANIEL J. 9/16/2015 00:55

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 ROCHESTER POLICE DEPARTMENT INCIDENT REPORT		CR # 2015-00235240	
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Statute - PL 120.05 03 DF2 Attempt/Commit - Completed Counts - 2 Description - Assault 2nd: W/Intent Cause Inj to Officer/Fireman/EMT/Nurse			
Location		Weapon	
Street-47		Not Reported-88	
Larceny Type		Aggravated Assault Circumstances	
		Assault on LE Officer	
Bias Type		Gang Related	
No Bias-Not Applicable-77		No	
Entry Point		Computer	
		No	
Method of Entry		# of Premises Entered	
Statute - Attempt/Commit - Counts -			
Description -			
Location		Weapon	
Larceny Type		Aggravated Assault Circumstances	
		Gang Related	
Bias Type		Computer	
Entry Point			
Method of Entry		# of Premises Entered	
Statute - Attempt/Commit - Counts -			
Description -			
Location		Weapon	
Larceny Type		Aggravated Assault Circumstances	
		Gang Related	
Bias Type		Computer	
Entry Point			
Method of Entry		# of Premises Entered	
Statute - Attempt/Commit - Counts -			
Description -			
Location		Weapon	
Larceny Type		Aggravated Assault Circumstances	
		Gang Related	
Bias Type		Computer	
Entry Point			
Method of Entry		# of Premises Entered	
Statute - Attempt/Commit - Counts -			
Description -			
Location		Weapon	
Larceny Type		Aggravated Assault Circumstances	
		Gang Related	
Bias Type		Computer	
Entry Point			
Method of Entry		# of Premises Entered	
Statute - Attempt/Commit - Counts -			
Description -			
Location		Weapon	
Larceny Type		Aggravated Assault Circumstances	
		Gang Related	
Bias Type		Computer	
Entry Point			
Method of Entry		# of Premises Entered	
Statute - Attempt/Commit - Counts -			
Description -			
Location		Weapon	
Larceny Type		Aggravated Assault Circumstances	
		Gang Related	
Bias Type		Computer	
Entry Point			
Method of Entry		# of Premises Entered	
Reporting Officer IBM # Date Reviewed By MITCHELL STEVEN 2134 09/15/2015 COR\dz295 ZIMMERMAN, DANIEL J.			

ADDITIONAL OFFENSES

18-cv-6464

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Victim Type Police Officer-L		Victim Name (Last, First, Middle) Drake, Matthew			
Address 185 EXCHANGE BLVD		Date of Birth	Age	Sex	Race
City, State, Zip ROCHESTER, NY 14614		Ethnicity N			
Telephone (585)428-1110		Level of Injury Physical Injury		Type of Injury Apparent Minor Injury	
		Medical Treatment Treated and Released			
Victim Type Society Public-S		Victim Name (Last, First, Middle) City of Rochester			
Address 185 Exchange BLVD		Date of Birth	Age	Sex	Race
City, State, Zip Rochester, NY 14614		Ethnicity Not Applicable			
Telephone (585)428-1110		Level of Injury Business - NA		Type of Injury Business - NA	
		Medical Treatment Business - NA			
Victim Type		Victim Name (Last, First, Middle)			
Address		Date of Birth	Age	Sex	Race
City, State, Zip		Ethnicity			
Telephone		Level of Injury		Type of Injury	
		Medical Treatment			
Victim Type		Victim Name (Last, First, Middle)			
Address		Date of Birth	Age	Sex	Race
City, State, Zip		Ethnicity			
Telephone		Level of Injury		Type of Injury	
		Medical Treatment			
Victim Type		Victim Name (Last, First, Middle)			
Address		Date of Birth	Age	Sex	Race
City, State, Zip		Ethnicity			
Telephone		Level of Injury		Type of Injury	
		Medical Treatment			
Victim Type		Victim Name (Last, First, Middle)			
Address		Date of Birth	Age	Sex	Race
City, State, Zip		Ethnicity			
Telephone		Level of Injury		Type of Injury	
		Medical Treatment			
Victim Type		Victim Name (Last, First, Middle)			
Address		Date of Birth	Age	Sex	Race
City, State, Zip		Ethnicity			
Telephone		Level of Injury		Type of Injury	
		Medical Treatment			

ADDITIONAL VICTIMS

18-CV-06464

Reporting Officer MITCHELL	IBN # STEVEN	Date 2134	Reviewed By 09/15/2015	COR\dz295\ZIMMERMAN, DANIEL J. 9/16/2015\00:55
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